AMENDED IN ASSEMBLY APRIL 5, 2011

CALIFORNIA LEGISLATURE—2011–12 REGULAR SESSION

ASSEMBLY BILL

No. 491

Introduced by Assembly Member Portantino

February 15, 2011

An act to amend—Section 120990 Sections 120990 and 123148 of, and to add Section 120889 to, the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 491, as amended, Portantino. HIV testing.

Existing law establishes the State Department of Public Health and sets forth its powers and duties, including, but not limited to, administration of a program to provide information, establish testing sites, and award contracts for AIDS early intervention projects to provide appropriate medical treatment to prevent or delay the progression of disease that results from HIV infection, to coordinate related services, and to provide information and education to prevent the spread of the infection to others. Existing law sets forth the powers and duties of an HIV counselor in a project HIV counseling and testing site funded by the department through a local health jurisdiction or its agents.

This bill would require the department to, upon appropriation by the Legislature, allocate state and federal funds that are intended to be used to test persons for HIV to a local health jurisdiction in accordance with the prevalence of HIV and AIDS in the local jurisdiction.

Existing law requires a medical care provider, prior to ordering an HIV test, to provide information about the test to the patient, to inform the patient that there are numerous treatment options available, and to

 $AB 491 \qquad \qquad -2 -$

13

14

15 16

17

inform the patient that a person who tests negative for HIV should continue to be routinely tested.

This bill would delete this provision, and would specify that an HIV counselor is a medical care provider for the purposes of related provisions. The bill would delete a provision requiring that the patient sign a specified written statement documenting the person's consent, and would delete related provisions. The bill would make related changes.

Existing law specifies the manner in which a health care professional at whose request a test is performed for HIV provides results.

This bill would authorize a clinical laboratory test result of a negative HIV antibody test to be posted on a secure Internet Web site if specified conditions are met.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all the 2 following:
- 3 (a) HIV testing has entered a new era as policymakers have 4 begun to understand that ensuring that more people know their 5 HIV status is critical to maintaining health and reducing the spread 6 of the virus. A person's awareness of his or her HIV status leads 7 to treatment, better survival rates, and preventing transmission.
- 8 (b) The California Office of AIDS estimates that up to 39,000 9 Californians have HIV and do not know it. People who do not 10 know their HIV status do not begin life-prolonging treatments, 11 and they continue to expose others to HIV through unprotected 12 risk behaviors.
 - (c) Research shows that when people learn they are infected with HIV, they take steps to protect their health and the health of their partners. In a 2005 meta-analysis of sexual behaviors, persons who knew their HIV status were 68 percent less likely to engage in unprotected intercourse with uninfected partners.
- 18 (d) According to the federal Centers for Disease Control and 19 Prevention, cohort studies have demonstrated that HIV-infected 20 persons who are unaware of their infection do not reduce risk 21 behaviors. Persons tested for HIV who do not return for test results 22 might even increase their risk for transmitting HIV to partners.

-3— AB 491

(e) Additionally, the earlier a person is diagnosed, the sooner he or she can access medical care and other prevention services to further prevent transmission and disease progression.

- (f) Because medical treatment that lowers HIV viral load might also reduce risk for transmission to others, early referral to medical care could prevent HIV transmission in communities while reducing a person's risk for HIV-related illness and death.
- (g) For all of these reasons, routine HIV testing is essential to any comprehensive HIV prevention program.
- (h) With an eye toward making HIV testing more routine, the federal government has adopted a national goal of six million HIV tests each year.
- (i) It is the intent of the Legislature that the State of California accomplish both of the following:
- (1) Make every effort to ensure that HIV testing is routinely available in physicians' offices, hospitals, clinics, and every other public and private medical and nonmedical setting in which HIV testing is administered.
- (2) Fulfill its fair share of the national testing goal by seeking to test 550,000 Californians each year.
- SEC. 2. Section 120889 is added to the Health and Safety Code, to read:
- 120889. The department shall, upon appropriation by the Legislature, allocate state and federal funds that are intended to be used to test persons for HIV to a local health jurisdiction in accordance with the prevalence of HIV and AIDS in the jurisdiction at the time of the allocation decision.
- SEC. 3. Section 120990 of the Health and Safety Code is amended to read:
- 120990. (a) Prior to ordering a test that identifies infection with HIV, a medical care provider shall inform the patient that the test is planned, provide information about the test, inform the patient that there are numerous treatment options available for a patient who tests positive for HIV and that a person who tests negative for HIV should continue to be routinely tested, and advise the patient that he or she has the right to decline the test. If a patient declines the test, the medical care provider shall note that fact in the patient's medical file. For the purposes of this subdivision, "a medical care provider" includes, but is not limited to, a person who is authorized to administer an HIV test pursuant to Section

AB 491 —4—

1 120917. This subdivision shall apply to testing in a clinical or 2 nonclinical setting, provided that for a test performed in a 3 nonclinical setting the setting has a certificate of waiver under the 4 federal Clinical Laboratory Improvement Act (CLIA) (42 U.S.C. 5 Sec. 263a).

- (b) Subdivision (a) shall not apply when a person independently requests an HIV test from the provider.
- (c) Except as provided in subdivision (a), no person shall administer an HIV antibody test unless the person being tested or his or her parent, guardian, conservator, or other person specified in Section 121020, signs a written statement documenting the person's informed consent to the test. This requirement does not apply to a test performed at an alternative site pursuant to Sections 120890 or 120895. Nothing in this section shall be construed to allow a person to administer a test for HIV unless that person is otherwise permitted under current law to administer an HIV test. (c)
- (d) Nothing in this section shall preclude a medical examiner or other physician from ordering or performing a test to detect HIV on a cadaver when an autopsy is performed or body parts are donated pursuant to the Uniform Anatomical Gift Act (Chapter 3.5 (commencing with Section 7150) of Part 1 of Division 7).

(d)

- (e) Nothing in this section shall be construed to permit any person to unlawfully disclose an individual's HIV status, or to otherwise violate provisions of Section 54 of the Civil Code, the Americans With Disabilities Act of 1990 (Public Law 101-336), or the California Fair Employment and Housing Act (Part 2.8 (commencing with Section 12900) of Division 3 of Title 2 of the Government Code), which prohibit discrimination against individuals who are living with HIV, or who test positive for HIV, or are presumed to be HIV-positive.
- SEC. 4. Section 123148 of the Health and Safety Code is amended to read:
- 123148. (a) Notwithstanding any other provision of law, a health care professional at whose request a test is performed shall provide or arrange for the provision of the results of a clinical laboratory test to the patient who is the subject of the test if so requested by the patient, in oral or written form. The results shall be conveyed in plain language and in oral or written form, except

5 AB 491

the results may be conveyed in electronic form if requested by the patient and if deemed most appropriate by the health care professional who requested the test.

- (b) (1) Consent of the patient to receive his or her laboratory results by Internet posting or other electronic means shall be obtained in a manner consistent with the requirements of Section 56.10 or 56.11 of the Civil Code. In the event that a health care professional arranges for the provision of test results by Internet posting or other electronic manner, the results shall be delivered to a patient in a reasonable time period, but only after the results have been reviewed by the health care professional. Access to clinical laboratory test results shall be restricted by the use of a secure personal identification number when the results are delivered to a patient by Internet posting or other electronic manner.
- (2) Nothing in paragraph (1) shall prohibit direct communication by Internet posting or the use of other electronic means to convey clinical laboratory test results by a treating health care professional who ordered the test for his or her patient or by a health care professional acting on behalf of, or with the authorization of, the treating health care professional who ordered the test.
- (c) When a patient requests to receive his or her laboratory test results by Internet posting, the health care professional shall advise the patient of any charges that may be assessed directly to the patient or insurer for the service and that the patient may call the health care professional for a more detailed explanation of the laboratory test results when delivered.
- (d) The electronic provision of test results under this section shall be in accordance with any applicable federal law governing privacy and security of electronic personal health records. However, any state statute, if enacted, that governs privacy and security of electronic personal health records, shall apply to test results under this section and shall prevail over federal law if federal law permits.
- (e) The test results to be reported to the patient pursuant to this section shall be recorded in the patient's medical record, and shall be reported to the patient within a reasonable time period after the test results are received at the offices of the health care professional who requested the test.
- (f) Notwithstanding subdivisions (a) and (b), none of the following clinical laboratory test results and any other related

AB 491 -6-

1 results shall be conveyed to a patient by Internet posting or other 2 electronic means:

- (1) HIV antibody test, except as provided in subdivision (k).
- (2) Presence of antigens indicating a hepatitis infection.
- (3) Abusing the use of drugs.
- (4) Test results related to routinely processed tissues, including skin biopsies, Pap smear tests, products of conception, and bone marrow aspirations for morphological evaluation, if they reveal a malignancy.
- (g) Patient identifiable test results and health information that have been provided under this section shall not be used for any commercial purpose without the consent of the patient, obtained in a manner consistent with the requirements of Section 56.11 of the Civil Code.
- (h) Any third party to whom laboratory test results are disclosed pursuant to this section shall be deemed a provider of administrative services, as that term is used in paragraph (3) of subdivision (c) of Section 56.10 of the Civil Code, and shall be subject to all limitations and penalties applicable to that section.
- (i) A patient may not be required to pay any cost, or be charged any fee, for electing to receive his or her laboratory results in any manner other than by Internet posting or other electronic form.
- (j) A patient or his or her physician may revoke any consent provided under this section at any time and without penalty, except to the extent that action has been taken in reliance on that consent.
- (k) The clinical laboratory test result of a negative HIV antibody test may be posted on a secure Internet Web site provided that all of the following conditions are met:
- (1) The test subject can view only his or her test result on the Internet Web site by using a unique access code provided to the test subject at the time of testing.
- (2) The test result is not posted on the Internet Web site any earlier than 10 calendar days after the test is administered and the test subject is advised that the result will not be posted until 10 days after the test is administered.
- (3) A test subject who has a positive test result is informed of the positive test result no more than nine calendar days after the test is administered.